

OMB No. 1840-0132 Form Approved Exp. 12/31/99

200-10-0501 ST-01 DRN: 1596

IMPORTANT: Read ALL information in Part 1 to find out what to do with this Report.

000,002C002

April 14, 0098 EFC: 00780 C

FRED R. STUDENT2 POB 3456 APPLEGATE DRIVE SAILERVILLE VA 20784

Read this letter carefully and review each item on Part 2 of this Student Aid Report (SAR). Follow the instructions at the top of Part 2 and in the Free Application for Federal Student Aid (FAFSA) instruction booklet to help you make corrections. If all the information on your SAR is correct, you do not need to return it to the Federal Student Aid Programs. For additional help with your SAR, contact your Financial Aid Administrator (FAA) or the Federal Student Aid Information Center at 1-800-4FED-AID (1-800-433-3243).

If all the information on this SAR is correct, you may be eligible to receive a Federal Pell Grant and other Federal student aid in 1998-99. Your FAA will determine whether you meet all eligibility requirements to receive aid. The amount of aid will depend on the cost of attendance at your school, your enrollment status (full-time, three-quarter-time, half-time, or less than half-time), Congressional budget restrictions, and other factors.

HERE IS WHAT YOU NEED TO DO NOW: Review the information on Part 2. If any of the information is incorrect, follow the instructions at the top of Part 2 to make corrections. IF ALL THE INFORMATION IS CORRECT, you should submit a photocopy of this SAR to all the schools that you may be interested in attending. Submit the original to the school where you actually enroll.

Based on the information you provided on your application, we had to assume certain information to calculate your eligibility for Federal student aid. We printed the assumption we made and the word "assumed" in the "You told us" column for each of these items. If these assumptions are correct, do not change them.

Be sure to review the items in boldface type on Part 2 of your SAR and make any corrections if necessary.

ATTENTION: We were unable to find any schools you listed on our school file, or you did not list any schools on your application, or did not verify any schools on your renewal application. To receive Federal student aid, you must attend a school that participates in the Federal student aid programs. Check with each school you are considering in 1998-99 to find out if it participates in these programs. Contact your FAA for assistance to make the necessary corrections to your SAR.

FAA INFORMATION This information will be used by your Financial Aid Administrator to determine your eligibility for student aid.

Agency Source: 5 MDE Record Type:

Record Type:

Verification Type:

Verification Flag:

Pell Digit: 6

Mode1: I

Duplicate Copy:

SysGen:

Dependency Override: Special Handling:

Reprocessing Code:

FAA Adjustment Flag:

Reject Reasons:

Application Receipt Date: 06/14/1997 Transaction Receipt Date: 01/01/1998

Subsequent Application Flag:

Early Analysis Flag:

MONTHS: 1 2 3 5 6 10 11 12 PRIMARY EFC: 00087 00174 00261 00348 00435 00522 00609 00696 00780 00707 00357 01044 SECONDARY EFC: 00087 00174 00261 00348 00435 00522 00609 00696 00780 00707 00357 01044

INTERMEDIATE COMPUTE VALUES:

TI: 0025000 ATI: 0025000 STX: 0021453 EA: STI: 0001750 0000000 IPA: 0002800 AI: CAI: 0001449 0003547 DNW: 000000000 FTI: 0000000

APA: PCA: 000000000 0000000 AAI: 0000000 TPC: 0000780 TSC: PC: 0000000 0000000 SIC: 0000000 SCA: 0000000

Auto Zero EFC Flag:

SNT Flag: Y Pell Eligible Flag: Y

MATCH FLAGS:

SSN Match Flag: INS Match Flag:

NSLDS Match Flag: 1

Selective Service Registration Flag:

INS Verification #: NSLDS Results Flag: 1

Selective Service Match: SSA Citizenship Code: NSLDS Transaction Number: 01

COMMENTS: 104

F-18 PAGE 2 OF 7

1998-99 Student Aid Report (SAR) FINANCIAL AID HISTORY

Processed: 03-17-98

This page contains your previous financial aid information, which is contained in the National Student Loan Data System (NSLDS). Your Financial Aid Administrator will use it to determine your eligibility.

#Overpayment:

Contact:

#Defaulted Loans: Y #Discharged: N #Loan Sat. Repayment: Y #Active Bankruptcy:

Pell:

Access NSLDS

Υ FSEOG: Perkins: Y

12345678

#Aggregate Amount for FFELP/Direct Loans:

Subsidized Loans: Outstanding Principal Bal.: \$123,456 Pending Disbursements: \$123,456

Total: \$123,45 Total: \$123,45

Unsubsidized Loans: Outstanding Principal Bal.: \$123,456

Pending Disbursements: \$123,456

Consolidated Loans: Outstanding Principal Bal.: \$123,456

Total: \$123,45

#Perkins Loans:

Cumulative Loan Amount \$123,456

First Disbursement Prior to 10/1/92: Y

Current Year Loan Amount \$123,456

Expanded Lending Option: Y

#1998-99 Pell Payment Data: Sch.Amt:\$2470 Disb.Amt:\$1270 Rem.Amt:\$ 0 %Sch.Used: 51.41 As of: 01/15/99

Sch.Code:76543210 Tran:01 Sch.Code: 12345678 Tran: 01 Sch.Amt: \$2470 Disb.Amt: \$1200 Rem.Amt: \$600 %Sch.Used. 72.87 As of: 07/15/98

Access NSLDS for additional Pell data.

Loan Detail:	Loan Amount	Loan Begin Date	Loan End Date	GA Code	School Code	Contact	Conta Typ€
#FFEL Stafford Unsubsidized Status Code DA as of 01/05/97 Outstanding Bal. \$ 800 as of 02/02/97	\$ 998	01/01/97	05/01/97	719	00132100	719	GA
#FFEL Stafford Subsidized Status Code FB as of 09/01/96 Outstanding Bal. \$ 5,200 as of 02/07/96	\$ 10,000	01/01/96	01/01/97	736	00132600	736	GA
#Direct Stafford Subsidized Status Code ID as of 09/06/96 Outstanding Bal. \$ 913 as of 02/03/96	\$ 1,400	01/01/96	01/01/97	N/A	00132700	SVO101	DLS
#Direct Consolidated Subsidized Status Code DL as of 12/06/96 Outstanding Bal. \$ 12,000 as of 01/01/97	\$ 15,000	08/01/95	05/10/96	N/A	00132100	SV0101	DLS
#Supplemental Loan (SLS) Status Code DX as of 05/01/96 Outstanding Bal. \$ 500 as of 02/02/97	\$ 961	01/01/95	04/01/95	701	00132600	N/A	N/#
<pre>#Perkins Expanded Lending Option Status Code DU as of 06/05/96 Outstanding Bal. \$ 4,400 as of 01/01/96</pre>	\$ 7,000	09/02/94	06/02/95	N/A	00132100	00132100	SCI
#FFEL Stafford Unsubsidized Status Code ID as of 09/01/94 Outstanding Bal. \$ 588 as of 09/02/96	\$ 916	09/01/94	12/01/94	734	00132100	830906	LEt
#Federal Perkins Status Code DL as of 01/01/96 Outstanding Bal. \$ 109 as of 02/01/96	\$ 1,043	09/01/93	01/01/94	N/A	00132300	00132300	SCI
#FFEL Stafford Subsidized Status Code RP as of 02/01/95 Outstanding Bal. \$ 700 as of 02/01/95	\$ 800	01/04/93	12/01/93	620	00132800	620	GA
#Federal Perkins Status Code DB as of 09/01/95 Outstanding Bal. \$ 300 as of 02/01/96	\$ 1,000	01/01/88	05/26/88	N/A	00132500	00132500	SCI
#FFEL Stafford Non-Subsidized Status Code DT as of 09/01/96 Outstanding Bal. \$ 9,500 as of 02/01/96	\$ 10,000	N/A	N/A	555	00132900	05	ED
#FFEL Stafford Unsubsidized Status Code DB as of 05/01/97 Outstanding Bal. \$ 4,570 as of 02/02/96	\$ 1,500	N/A	N/A	555	00132700	04	EDI
Outstanding Bal. \$ 4,570 as of 02/02/96	 		leen noond				

Access NSLDS for additional loan records.

1998-99 Student Aid Report Federal Student Aid Programs Part 2 - Information Request Form

OMB No. 1840-0132 Form Approved EXP. 12/31/99

Processed: 04-14-98

- · You must respond to ALL items in BOLDFACE TYPE before we can process your form.
- · Look for arrows ---> in the area next to your reported data. Your answer was unacceptable or needs to be verified.
- Give us a new answer in the boxes that appear to the right of the arrow. OR
- If you need to verify the data you reported is correct, re-enter the same value in the boxes that appear to the right of the arrow.
- To delete a preprinted answer in the "You told us" column, draw a line completely through the answer boxes to the right of the item.
- · Use the code information on the Instructions and Codes page if you need to correct items 28 and/or 29.
- * Sign and send BOTH pages of Part 2 to the address on the last page of Part 2. Do not attach tax or any other forms.
- If you need to correct an item that contains an oval \square completely fill in the oval as follows: \bullet . Do not X or \checkmark ovals. Erase or white-out mistakes completely.
- Print corrections neatly in answer boxes: SAMPLE

• Print corrections neatly in answer box	es: SAMPLE ABCD123	200-10-0501 ST-01 DRN: 159
Section A: You (the Student)		
YOU TOLD US	WRITE IN ONLY NEW OR CORRECTED INFORMATION.	
1. Last Name STUDENT2		
2. First Name FRED	3. Middle Initial	
4. Permanent Street Address POB 3456 APPLEGATE DRIVE		
5. City SAILERVILLE		
6. State Abbreviation VA	7. ZIP Code 20784	
8. Social Security Number 200-10-0501		
9. Date of Birth AUGUST 01, 0069	1 9 Use MM-DD-CCYY format (e.g., 05-01-19	979)
10. Permanent Home Phone Number (319) 534-9200		
State of Legal Residence Abbreviation VA	12. Date You Became a Legal Resident JANUARY 7501	Use MM-CCYY format (e.g., 05-1996)
13. Driver's License Number		
14. Driver's License State Abbreviation VA		
15. Citizenship Status U.S. CITIZEN	U.S. Citizen 1 Eligible Non-Citizen 2 Neither 3	
16. Alien Registration Number	A	
17. Marital Status UNMARRIED	Single, Widowed or Divorced 1 Married 2 Separated	3
18. Date of Marital Status (BLANK)	1 9 Use MM-CCYY format (e.g., 05-1996)	
19. First Bachelor's Degree by 7-1-1998?	Yes 1 No 2	
20. High School Diploma or GED? YES	Yes 1 No 2	
21. Father's Educational Level HIGH SCHOOL	Elementary (K-8) 1 High School (9-12) 2 College or beyond	3 Unknown 4
22. Mother's Educational Level COLLEGE	Elementary (K-8) 1 High School (9-12) 2 College or beyond	3 Unknown 4

Section B: Your Plans		
YOU TOLD US	WRITE IN ONLY NEW OR CORRECTED INFORMATION.	
23. Enrollment Status Summer Term 1998 FULL TIME	Full time 1 3/4 time 2 2 1/2 time 3 Less than 1/2 time	4 Not enrolled 5
24. Enrollment Status Fall Sem./Qtr. 1998 3/4 TIME	Full time 1 3/4 time 2 2 1/2 time 3 4 Less than 1/2 time 3	4 Not enrolled 5 5
25. Enrollment Status Winter Qtr. 1998-99 1/2 TIME	Full time 1 3/4 time 2 1/2 time 3 Less than 1/2 time	4 Not enrolled 5
26. Enrollment Status Spring Sem./Qtr. 1999 LESS THAN 1/2 TIME	Full time 1 3/4 time 2 1/2 time 3 Less than 1/2 time 5	4 Not enrolled 5
27. Enrollment Status Summer Term 1999 NOT ENROLLED	Full time 1 3/4 time 2 1/2 time 3 Less than 1/2 time	4 Not enrolled 5
28. Course of Study THEOLOGY	Enter Code from Instructions	
29. Type of Degree/Certificate GRAD/PROF	Enter Code from Instructions	
30. Date Expect to Receive Degree/Cert. MAY 1997	Use MM-CCYY format (e,g., 05-1999)	
31. Grade Level in College in 1998-99 (BLANK)	1 st Never Attended 1 3rd/Junior 4 1st Yr. Graduate 7 1st Previously Attended 2 4th/Senior 5 2nd Yr. Graduate 8 2nd/Sophomore 3 5th or More 6 3rd Yr. Graduate 9	Beyond 3rd 10 Yr. Graduate
32. Interested in Student Employment? YES	Yes 1 No 2	
33. Interested in Student Loans? YES	Yes 1 No 2	
34. Interested in Parent Loans? YES	Yes 1 No 2 36. Monthly VA Benefits Amount \$ 125	\$.00
35. Attending Same College in 1998-99? YES	Yes 1 No 2 37. How Many Months Receive VA Benefits?	
Section C: Student Status		
38. Born Before 1-1-1975? NO	Yes 1 No 2 41. Are You Married?	Yes _ 1 No _ 2
39. Veteran of U.S. Armed Forces? NO	Yes 1 No 2 42. Orphan or Ward of Court?	Yes _ 1 No _ 2
40. Enrolled in Graduate Program in 1998-99? NO	Yes 1 No 2 43. Have Dependents Other Than Spouse? NO	Yes 1 No 2
Section D: Household Information STUDENT (and Spouse) 44. Number of Family Members in 1998-99 03 45. Number in College in 1998-99	on	
PARENT(S)		
46. Parent(s) Marital Status MARRIED	Single _ 1 Married _ 2 Separated _ 3 Divorced 4 Widov	ved 🤃 5
47. Parent(s) State of Legal Residence I A		
18. Date Parènt(s) Became Legal Resident JANUARY 1964	1 9 Use MM-CCYY format (e.g., 05-1979)	
19. Parent(s) Number of Family Members in 1998-99 02	Part 2 (of your Information Request Form) is continued on the following the instructions on the front of Part 2 when reviewing the rest of your	ng page. Please refer t
50. Number of Parent(s) Family Members ın College in 1998-99 1	to send BOTH pages of Part 2 to the address next to the Certification Part 2.	statement at the end c

Section E: 1997 Income, Earnings and Benefits	Codes for Types of 1997 Tax Form A - completed 1997 1040A, 1040E B - completed 1997 1040 C - estimated 1997 1040A, 1040E2	Z, or 1040TEL D - estimated 1997 10 E - will not file 1997	U.S. Income Tax Return
STUDENT (and Spouse)	<u> </u>	PARENT(S)	
51. Type of 1997 Tax Form Used	A C 1 D C 4	63. Type of 1997 Tax Form Used	A 1 D 4
COMPLETED 1040A/EZ/TEL		NOT FILED	A 1 D 4 B 2 E 5 C 3
52. Exemptions Claimed		64. Exemptions Claimed	
03		∞	
53. Adjusted Gross Income		65. Adjusted Gross Income	
From IRS Form \$ 25,000	\$.00	From IRS Form \$ 50,000	\$.c
54. U.S. Income Tax Paid	\$.00	66. U.S. Income Tax Paid	
\$ 2,790	\$.00	\$ 6,321	\$.0
55. Student's Income Earned		67. Father's Income Earned	
From Work \$ 25,000	\$.00	From Work \$ 15,000	\$.0
56. Spouse's Income Earned		68. Mother's Income Earned	
From Work \$ 0	\$.00	From Work \$ 35,000	\$.0
57. Earned Income Credit		69. Earned Income Credit	
\$ O	\$.00	\$ 0	\$.00
58. Annual Social Security Benefits	\$ 00	70. Annual Social Security Benefits	
\$ O	\$.00	\$ 0	\$.00
59. Annual AFDC/ADC or TANF		71. Annual AFDC/ADC or TANF	
\$ O	\$.00	\$ 0	\$.00
60. Annual Child Support Received	\$.00	72. Annual Child Support Received	\$.00
\$ O	\$.00	\$ O	\$.00
61. Other Untaxed Income	\$ 00	73. Other Untaxed Income	
\$ O	\$.00	\$ 0	\$.00
62. 1997 Amount From Line 5,		74. 1997 Amount From Line 5,	
Worksheet #3 \$ O	\$.00	Worksheet #3	\$.00
Section F: Asset Informat. STUDENT (and Spouse) 75. Cash, Savings, and Checking]	PARENT(S) 82. Age of Older Parent 00 83. Cash, Savings, and Checking	
\$ 0	\$.00	\$ 0	\$.00
76. Other Real Estate/Investment		84. Other Real Estate/Investment	1
Value \$ 0	\$.00	Value \$ 0	\$.00
77. Other Real Estate/Investment	1	85. Other Real Estate/Investment	-{
Debt \$ O	\$.00	Debt \$ 0	\$.00
78. Business Value		86. Business Value	
\$ O	\$	\$ 0	\$
79. Business Debt		87. Business Debt	
\$ O	\$.00	\$ 0	\$.00
80. Investment Farm Value	1	88. Investment Farm Value	1
\$ O	\$	\$ 0	\$.00
81. Investment Farm Debt	1-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,	89. Investment Farm Debt	
\$ O	\$	\$ 0	\$.00

3 Q

Section G:	· · · · · · · · · · · · · · · · · · ·		Housing Codes:	1 on-Campus	3 with parent(s)
Releases and Signatures				2 off-Campus	
90. First College Name, City and State OBERLIN COLLEGE OBERLIN, OH	NEW/COF	RRECTED COLLEGE NAME,	CITY, STATE, ZIP	Enter Code I 91. Housing CAMPUS	
92. Second College Name, City and State OHIO NORTHERN UNIVERSITY ADA, OH				93. Housing OFF-CAM	
94. Third College Name, City and State OHIO STATE UNIVERSITY COLUMBUS, OH			V	95. Housing WITH PA	
96. Fourth College Name. City and State OBERLIN COLLEGE OBERLIN, OH				97. Housing	Code
98. Fifth College Name, City and State OHIO NORTHERN UNIVERSITY ADA, OH				99. Housing	· ·
100. Sixth College Name, City and State OHIO STATE UNIVERSITY COLUMBUS, OH			•	101. Housing	i
102. Should Data Be Released To State? YES	Yes 🗀 1	No Z 2			
103. Register You For Selective Service? (BLANK)	Yes 1				
104. Signed By? BOTH	DO NOT CO	PRRECT			
105. Date Completed JANUARY 03, 0097	DO NOT CO	PRRECT			
106. Preparer's EIN (BLANK)					
107. Preparer's Social Security Number (BLANK) 108. Preparer's Signature					
(BLANK)					
SEND BOTH PAGES OF THIS FORM TO:	7	You must read to		•	
Federal Student Aid Programs P.O. Box 7020 Lawrence, KS 66044-7020		complete to the best of the information, which m form. If you purposely g \$10,000, sent to prison,	your knowledge. If lay include a copy ive false or mistea or both. You also o	asked, you agree to of your U.S. or state ding information, you certify that:	give proof of income tax may be fined
0.61110.18	<u>'</u>	the award year expenses related	covered by this app if to attendance dur	nancial aid funds receilication solely for ecing that year at the illigibility for those fu	ducational nstitution of
School Use Only Professional Judgment				V educational loan, or ments to repay your	
D/O 1 2 7				a Title IV education ments to repay that o	
FAA Signature		you will notify y default.	our school if you	do owe an overpayme	ent or are in
1		Everyone whose informat student (and at least one or this form will be retu	parent, if parental		
MDE Use Only		1 Student		Date	
DE Special Handle		2 Student's Spouse		Date	
		3 Father/Stepfather		Date	
		4 Mother/Stepmother		Date	
	PA	F-24 GE 7 OF 7	4 X	200-10-05	01 ST 01